

# U.S. DOT CROSSING INVENTORY FORM

DEPARTMENT OF TRANSPORTATION  
FEDERAL RAILROAD ADMINISTRATION (FRA)

OMB Control No. 2130-0017  
Expires: 3/31/2003

A. Initiating Agency <input checked="" type="checkbox"/> Railroad <input type="checkbox"/> State	B. Crossing Number <b>288 961 E</b>	C. Reason for Update <input checked="" type="checkbox"/> Changes in Existing Data <input type="checkbox"/> New Crossing <input type="checkbox"/> Closed Crossing or Abandoned	D. Effective Date <b>6/4/2003</b>
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## Part I: Location and Classification Information

1. Railroad Operating Company <b>IC</b>		2. State <b>IL</b>		3. County <b>IROQUOIS</b>	
4. Railroad Division or Region <b>NORTHERN REG</b>		5. Railroad Subdivision or District <b>CHICAGO</b>		6. Branch or Line Name	
7. RR Milepost (nnnnn.nn)		8. RR I.D. No.			
9. Nearest RR Timetable Station (optional)		10. Parent RR (if applicable)		11. Crossing Owner (RR or Company Name)	
12. City <input checked="" type="checkbox"/> In <b>CHEBANSE</b> <input type="checkbox"/> Near		13. Street or Road Name <b>CHEBANSE ST</b>		STATE SUPPLIED INFORMATION	
14. Highway Type & No.		15. ENS Sign Installed (1-800) <input type="checkbox"/> Yes <input type="checkbox"/> No		16. Quiet Zone <input type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr. <input type="checkbox"/> Unknown	
17. Crossing Type (choose one only) <input checked="" type="checkbox"/> Public <input type="checkbox"/> Private <input type="checkbox"/> Pedestrian		18. Crossing Position <input checked="" type="checkbox"/> At Grade <input type="checkbox"/> RR Under <input type="checkbox"/> RR Over		19. Type of Passenger Service <input type="checkbox"/> AMTRAK <input type="checkbox"/> AMTRAK & Other <input type="checkbox"/> Other <input type="checkbox"/> None	
20. Average Passenger Train Count Per Day		21. HSR Corridor ID		22. County Map Ref. No. N/A	
23. Latitude (nn.nnnnnnnn)		24. Longitude (nnn.nnnnnnnn)		25. Lat/Long Source <input type="checkbox"/> Actual <input type="checkbox"/> Estimated	
26. Is There an Adjacent Crossing With a Separate Number? <input type="checkbox"/> Yes <input type="checkbox"/> No If Yes, Provide Number					

### 27. PRIVATE CROSSING INFORMATION

27.A. Category (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Recreational <input type="checkbox"/> Residential <input type="checkbox"/> Industrial <input type="checkbox"/> Commercial		27.B. Public Access <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown		27.C. Signs/Signals <input type="checkbox"/> None <input type="checkbox"/> Signs Specify <input type="checkbox"/> Signals Specify	
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28.A. Railroad Use		29.A. State Use	
28.B. Railroad Use		29.B. State Use	
28.C. Railroad Use		29.C. State Use	
28.D. Railroad Use		29.D. State Use	
30. Narrative			

31. Emergency Contact (Telephone No.)		32. Railroad Contact (Telephone No.)		33. State Contact (Telephone No.)	
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## MUST COMPLETE REMAINDER OF FORM FOR PUBLIC VEHICLE CROSSINGS AT GRADE

### Part II: Railroad Information

1. Number of Daily Train Movements			
1.A. Total Trains	1.B. Total Switching Trains	1.C. Total Daylight Thru Trains (6 AM to 6 PM)	1.D. Check if Less Than One Movement Per Day <input type="checkbox"/>
2. Speed of Train at Crossing 2.A. Maximum Time Table Speed (mph) 2.B. Typical Speed Range Over Crossing (mph) from to			
3. Type and Number of Tracks Main Other If Other, Specify			
4. Does Another RR Operate a Separate Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR <input type="checkbox"/> No		5. Does Another RR Operate Over Your Track at Crossing? <input type="checkbox"/> Yes If Yes, Specify RR <input type="checkbox"/> No	

X-11893

702-0043

**DOCKETED**

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B. Crossing Number <b>288 961E</b>	<b>PAGE 2</b>	D. Effective Date <b>6/4/2003</b>
<b>Part III: Traffic Control Device Information</b>		
1. No Signs or Signals <input type="checkbox"/> Check if Correct	2. Type of Warning Device at Crossing – Signs ( <i>specify number of each</i> )	
	2.A. Crossbucks	2.B. Highway Stop Signs ( <i>R1-1</i> )
	2.C. RR Advance Warning Signs ( <i>W10-1</i> ) <input type="checkbox"/> Yes <input type="checkbox"/> No	
	2.D. Hump Crossing Sign ( <i>W10-5</i> ) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Unknown	
2.E. Pavement Markings  <input type="checkbox"/> Stoplines <input type="checkbox"/> RR Xing Symbols <input type="checkbox"/> None		2.F. Other Signs: ( <i>specify MUTCD type</i> )  Number                      Specify Type  Number                      Specify Type
3. Type of Warning Device at Crossing – Train Activated Devices ( <i>specify number of each</i> )		
3.A. Gates  <b>2</b>	3.B. Four-Quadrant (or full barrier) Gates <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.C. Cantilevered (or Bridged) Flashing Lights Over Traffic Lane (number) Not Over Traffic Lane (number)
3.D. Mast Mounted Flashing Lights (number)  <b>2</b>		3.E. Number of Flashing Light Pairs  <b>6</b>
3.F. Other Flashing Lights:  Number                      Specify Type		3.G. Highway Traffic Signals (number)
		3.H. Wigwags (number)
		3.J. Bells (number)  <b>1</b>
3.K. Other Train Activated Warning Devices: ( <i>specify</i> )		
4. Specify Special Warning Device NOT Train Activated:		5. Channelization Devices With Gates <input type="checkbox"/> All Approaches <input checked="" type="checkbox"/> One Approach <input type="checkbox"/> None
6. Train Detection <input checked="" type="checkbox"/> Constant Warning Time <input type="checkbox"/> DC/AFO <input type="checkbox"/> Motion Detectors <input type="checkbox"/> Other <input type="checkbox"/> None	7. Signaling for Train Operation: Is Track Equipped with Train Signal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. Traffic Light Interconnection/Preemption <input checked="" type="checkbox"/> Not Interconnected <input type="checkbox"/> N/A <input type="checkbox"/> Simultaneous Preemption <input type="checkbox"/> Advance Preemption		
9. Reserved for Future Use	10. Reserved for Future Use	11. Reserved for Future Use
<b>Part IV: Physical Characteristics</b>		
1. Type of Development <input type="checkbox"/> Open Space <input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input checked="" type="checkbox"/> Industrial <input type="checkbox"/> Institutional		2. Smallest Crossing Angle <input type="checkbox"/> 0°-29° <input type="checkbox"/> 30°-59° <input type="checkbox"/> 60°-90°
3. Number of Traffic Lanes Crossing Railroad	4. Are Truck Pullout Lanes Present? <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Is Highway Paved? <input type="checkbox"/> Yes <input type="checkbox"/> No
6. Crossing Surface (on main line) <input type="checkbox"/> 1. Timber <input type="checkbox"/> 2. Asphalt <input type="checkbox"/> 3. Asphalt and Flange <input type="checkbox"/> 4. Concrete <input type="checkbox"/> 5. Concrete and Rubber <input type="checkbox"/> 6. Rubber <input type="checkbox"/> 7. Metal <input type="checkbox"/> 8. Unconsolidated <input type="checkbox"/> 9. Other ( <i>Specify</i> )		
7. Does Track Run Down a Street? <input type="checkbox"/> Yes <input type="checkbox"/> No	8. Nearby Intersecting Highway <input type="checkbox"/> Less than 75 feet <input type="checkbox"/> 75 to 200 feet <input type="checkbox"/> 200 to 500 feet <input type="checkbox"/> N/A  Is it Signalized? <input type="checkbox"/> Yes <input type="checkbox"/> No	
9. Is Crossing Illuminated? ( <i>street lights within approx. 50 feet from nearest rail</i> ) <input type="checkbox"/> Yes <input type="checkbox"/> No	10. Is Commercial Power Available? <input type="checkbox"/> Yes <input type="checkbox"/> No	11. Space Reserved For Future Use
<b>Part V: Highway Information</b>		
1. Highway System <input type="checkbox"/> Interstate <input type="checkbox"/> Federal Aid, Not NHS <input type="checkbox"/> Nat. Hwy System (NHS) <input type="checkbox"/> Non-Federal Aid	2. Is Crossing on State Highway System? <input type="checkbox"/> Yes <input type="checkbox"/> No	3. Functional Classification of Road at Crossing
4. Posted Highway Speed		
5. Annual Average Daily Traffic (AADT)  Year                      AADT	6. Estimate Percent Trucks	7. Average Number of School Buses Over Crossing per School Day

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7. RR Milepost (nnnnn.nn)		8. RR I.D. No.		9. Nearest RR Timetable Station (optional)	
10. Parent RR (if applicable)		11. Crossing Owner (RR or Company Name)			
12. City <input checked="" type="checkbox"/> In <b>CHEBANSE</b> <input type="checkbox"/> Near		13. Street or Road Name <b>FIRST SOUTH ST</b>		STATE SUPPLIED INFORMATION	
14. Highway Type & No.		15. ENS Sign Installed (1-800) <input type="checkbox"/> Yes <input type="checkbox"/> No		16. Quiet Zone <input type="checkbox"/> No <input type="checkbox"/> Partial <input type="checkbox"/> 24 hr. <input type="checkbox"/> Unknown	
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3.F. Other Flashing Lights:  Number                      Specify Type		3.G. Highway Traffic Signals ( <i>number</i> )
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